Effective October 1, 2003 10, 7621 9 7														
-	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
1	TOTAL CLAIMS		1.			• • •		RATE	FEE		RATE			
Ľ	OR :	NUMB	NUMBER FILED		NUMBER EXTRA .		BASIC F	EE 385:0	O OF					
Ŀ	OTAL CHARG		minus 20=				X3 9=		7	1000	1			
İħ	DEPENDENT	1-1	minus 3 =			X43		-		100	<u> </u>			
N	ULTIPLE DEPI	ENDENT CLAIM	PRESENT			П	1			-OA	. X86=	·		
* If the difference in column 1 is less than zero, enter "0" in column 2										·				
I JAM OR TOTAL														
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY														
AMENDMENT A		CLAIMS REMAINING 'AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA].[RATE	ADDI- TIONAL FEE	7	RATE	ADDI- TIONAL FEE		
NOX.	Total	-31	. Minus	- 63		-		X\$ 9=		OR	X\$18=	- CEE		
AME	Independent	. 4	Minus	4		-		X43=		1	X86=			
	FIRST PRES	ENTATION OF M	ULTIPLE DI	PENDENT	CLAIM		-		 	OR.				
107AL ADDIT. FEE OR +290= OR +290= OR ADDIT. FEE (Column 1): (Column 2) (Column 3)														
9	<i>y</i> .	CLAIMS		HIGHEST .					ADDI-	7. I	<u> </u>	ADDI-		
7	· .	AFTER AMENDMENT		PREVIOU PAID FO	JSLY	PRESENT	11	RATE	TIONAL FEE	<u>ا</u> ا	RATE	TIONAL		
MENDMENT B	Total	• 35	Minus	- 63	•	• —	ľ	X\$ 9=		OR	X\$18=	· ree		
1	Independent	• 1	Minus	*** G		· /		X43=		1	X86=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR X85												•		
			•				L	+145=.		OR	+290=			
			•				A	DIT. FEE		OR ,	TOTAL DOIT, FEE			
	`	(Column 1) CLAIMS		(Column HIGHES	۲ .	(Column 3)	_							
	•	REMAINING AFTER AMENDMENT		PREVIOUS PAID FO	Y.F	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE		
: -		•	Minus			e .		X\$ 9=		OR	X\$18=			
-	ndependent		Minus ·	. sin			-	X43>		· · · ·	X86=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X435 OR X86=														
If the entry in column 1 is less than the entry in column 2, write "o" in column 3.														
96 1	IN LIBUTEST KIND	Der Previousiv Pai	d For IN THIS	SPACE to to	a then	* 000 volue 05	ADI	TOTAL DIT, FEE	·	OR A	TOTAL			
Th	The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE													

Application or Docket Number